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INFO RUEHPH/CDC ATLANTA GA IMMEDIATE RUEAUSA/DEPT OF HHS WASHINGTON DC  $\,$ 

RHEHNSC/NSC WASHDC

RUEKJCS/SECDEF WASHINGTON DC

RUEHRC/DEPT OF AGRICULTURE WASHDC

RUEHGP/AMEMBASSY SINGAPORE 3529

RUCNASE/ASEAN MEMBER COLLECTIVE

RUEHGVA/USMISSION GENEVA 0105

RUEHZN/ENVIRONMENT SCIENCE AND TECHNOLOGY COLLECTIVE

UNCLAS BANDAR SERI BEGAWAN 000178

## SENSITIVE

#### SIPDIS

SINGAPORE FOR MED/BROWNL

STATE FOR CA/OCS/EAP

STATE FOR EAP/MTS/COPPOLAMG

STATE FOR S/ES-O/CMS EPARRA

STATE FOR M/PRI/MORRITZR

STATE FOR OES/AIAG

STATE FOR REO/BKK/HOWARDH

HHS FOR OGHA

CDC ATLANTA FOR CCID AND COGH

USDA FOR APHIS

E.O. 12958: N/A

TAGS: KFLU AEMR ASEC CASC TBIO PREL PINR BX

SUBJECT: BRUNEI MOVES TO MITIGATION

REF: A) BANDAR SERI BEGAWAN 146 B) BANDAR SERI BEGAWAN 165

## SUMMARY

11. (SBU) Brunei's Ministry of Health (MoH) announced plans to move from containment of the H1N1 virus to mitigation. As noted in reftels, this announcement has been expected. Concerns have been raised that the MoH's public health campaign and statements made by senior department officials are not accurate and could lead to unnecessary treatment. Tamiflu supplies are reported at lower levels than originally announced. One US Embassy staff member and family have been subject to home quarantine procedures. End Summary.

# BRUNEI MOVES TO MITIGATION

12. (U) Brunei's Ministry of Health (MoH) announced that containment of the H1N1 virus is no longer the primary public health strategy for the Government of Brunei. Instead, like many countries, Brunei will adopt mitigation standards to lessen the impact of H1N1 on Brunei. As noted in reftels, this change in public health strategy has been anticipated. Brunei's new case load has dropped recently. For the first time in many weeks, no new cases were reported yesterday. MoH officials noted that they believe now is the time to adopt a mitigation strategy regarding H1N1.

# PUBLIC HEALTH MEASURES: SEEDING CONFUSION

 $\P 3$ . (SBU) While moving to a mitigation strategy and still actively engaged in a public awareness campaign, recent statements, as quoted in the press, have lead to confusion and concern among health care practitioners and the public. A recent public statement by a MoH official that H1N1, if left untreated, could lead to death, is a prime example. Little was offered in the way of clarification or noting that deaths linked with H1N1 are often in persons with prior and serious medical conditions. Local health care practitioners have spoken to embassy officials and noted concerns that the MoH's

public awareness campaign is now causing confusion and unnecessary alarm regarding  ${\tt H1N1.}$ 

## **ENOUGH SUPPLIES?**

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4 (SBU) While initial MoH reports, per Reftels, stated there would be ample Tamiflu supplies, it now appears that current stockpiles are lower than reported. Supplies reportedly could be provided to approximately 30% of the population, although this has not been independently verified. Potentially low level of supplies combined with a public awareness campaign encouraging treatment (often with Tamiflu) may cause a further dwindling of limited supplies. The Bruneian press also continues to report on concerns about the ability and timing of H1N1 vaccine shipments.

### COMMENT

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14. (SBU) New H1N1 case numbers are reportedly dropping and the MoH recent move to mitigation over containment strategy are seen as positive developments in Brunei. However, concerns regarding Tamiflu and potential vaccine supplies remain, coupled with potentially alarmist and, at times, a contradictory public health campaign. Embassy staff and families have been fortunate in not suffering from H1N1, with only one staff member and his family quarantined at home.

MCINTYRE